



# REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

(CFA-4)

## Summary Sheet

FILE NUMBER

49-2275

TOTAL PAGES IN ENTIRE CFA-4 REPORT

8

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? ☐ Yes ☒ No

### COMMITTEE INFORMATION

1. Full Name of Committee (as on Statement of Organization) ☐ Check if this is a new name

FRIENDS OF PFISTERER

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number

(317) 244-7156

4. Mailing Address (address where all campaign finance correspondence is received) ☐ Check if this is a new address

1001 MT. AUBURN DRIVE

5. City, State, ZIP Code

INDIANAPOLIS, INDIANA 46224

6. Party Affiliation (if applicable)

REPUBLICAN

### CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (include any nickname)

MARILYN PFISTERER

8. Party Affiliation or If Independent Candidate

REPUBLICAN

9. Office Sought (Include district number, if any. Not required for exploratory committee.)

CITY COUNTY COUNCIL DISTRICT 14

10. County of Residence

MARION

### TYPE OF REPORT

11. Check one:

☐ Pre-Primary ☒ Pre-Election ☐ Annual ☐ Nomination ☐ Other \_\_\_\_\_  
☐ Final/Disbands Committee (lines 18, 19, and 20 must be "0") ☐ Outgoing Treasurer (within 10 days amend Statement of Organization)

Check one:

☐ Pre-Convention  
☐ Post-Convention

12. Reporting Period:

From: 4-14-2007 Through: 10-12-2007

COLUMN A  
This Period

COLUMN B  
Year to Date

13. Cash on hand and investments at the beginning of this reporting period.

1844.14

14. Cash on hand and investments January 1, current year.

292.13

### CONTRIBUTIONS AND RECEIPTS

(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (use Schedule A)

7014.00 8014.00

15b. Unitemized

2074.00 4304.00

15c. Add lines 15a and 15b in both columns

SUBTOTAL

9088.00 12318.00

16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B

TOTAL

10,932.14 12,610.13

### EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)

17a. Itemized (use Schedule B) (Public Question: use Schedule C)

10283.28 11961.27

17b. Unitemized

0 0

17c. Add lines 17a and 17b in both columns

SUBTOTAL

10283.28 11961.27

18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)

TOTAL

648.86 648.86

19. Debts OWED BY the committee (use Schedule D)

1500.00

20. Debts OWED TO the committee (use Schedule E)

0

### CERTIFICATION

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Signature of Treasurer

Title

Date

Charles J. Pfisterer

TREASURER

18 Oct. 2007

Signature of Candidate (if applicable)

Date

Marilyn Pfisterer

Oct 18, 2007

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor. (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

FOR OFFICE USE ONLY

OCT 18 2007

FILED



REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1)  
CONTRIBUTIONS BY INDIVIDUALS  
Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER

49-2275

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CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. MICHAEL LAROSA 4742 BROADWAY ST INDIANAPOLIS, IN 46205  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	150.00		17 Sept 07 Marilyn Pfister
2. JOHN HAMMOND III 612 E. 13 <sup>TH</sup> ST INDIANAPOLIS, IN 46202  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	250.00		20 April 07 Marilyn Pfister
3. KATHRYN DENSBOEN 7649 WASHINGTON BLVD. INDIANAPOLIS, IN 46240  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	150.00		20 April 07 Marilyn Pfister
4. PE MAC ALLISTER P.O. BOX 1941 INDIANAPOLIS, IN 46219  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	500.00		11 July 07 Marilyn Pfister
5. LEANA RICHARDS 5862 DEVERS DR-APT D INDIANAPOLIS, IN 46216  Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	200.00		11 July 07 Marilyn Pfister
SUBTOTAL THIS PAGE OF SCHEDULE A		\$1250.00		



**REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE**

State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE A-1)  
CONTRIBUTIONS BY INDIVIDUALS  
Itemized Contributions and Other Receipts**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

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CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. RON FISHER 2518 N. LYNHURST SPEEDWAY, IN 46224  Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	150.00		11 July 07 Marilyn Pfister
2. STEPHEN WEST 4120 N. ILLINOIS INDIANAPOLIS, IN 46208  Contributor's Occupation (if required) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____	900.00		26 APRIL 07 Marilyn Pfister
3.  Contributor's Occupation (if required) _____	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____			
4.  Contributor's Occupation (if required) _____	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____			
5.  Contributor's Occupation (if required) _____	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) _____			
SUBTOTAL THIS PAGE OF SCHEDULE A		\$ 1050.00		



REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE  
State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-2)  
CONTRIBUTIONS BY CORPORATIONS  
Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED B
1. ACCOUNTABLE SOLUTIONS INC 3210 N. WASHINGTON RD FORT WAYNE, IN 46802	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	264.00		23 Sept 07 Marilyn Pfister
2. GARCIA CONST. GROUP INC, 6002 N. MICHIGAN RD INDIANAPOLIS, IN 46228	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	150.00		11 July 07 Marilyn Pfister
1. HERMAN + KITTLE PROP. INC 500 E. 96 <sup>TH</sup> - SUITE 200 INDIANAPOLIS, IN 46240	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	300.00	550.00	11 July 07 Marilyn Pfister
4.	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)			
5.	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)			
SUBTOTAL THIS PAGE OF SCHEDULE A		\$ 714.00		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY				



**REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE**

State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE A-4)  
CONTRIBUTIONS BY  
POLITICAL ACTION COMMITTEES**  
Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. INDIANAPOLIS CHAMBER OF COMMERCE BUSINESS ADVOCACY COMM. 111 MONUMENT CIRCLE-STE 1950 INDIANAPOLIS, IN 46204	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	500.00		26 Sept 07 Marilyn Pfeiffer
2. FDP PAC ACCOUNT 1431 E. WASHINGTON INDIANAPOLIS, IN 46201	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	1000.00		22 Sept 07 Marilyn Pfeiffer
3. INSURANCE PAC 207 N. ILLINOIS ST INDIANAPOLIS, IN 46204	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	300.00		11 July 07 Marilyn Pfeiffer
4. FIRE FIGHTERS PAC 735 MASS. AV. INDIANAPOLIS, IN 46204	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	750.00		11 July 07 Marilyn Pfeiffer
5.	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)			

2550.00



REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)

Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-5)  
CONTRIBUTIONS BY  
OTHER ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15g of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. MOTSINGER FOR SHERIFF 1841 LUDLOW AV. INDIANAPOLIS, IN 46201	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	200.00		21 Sept 07 Marilyn Pfister
2. WAYNE TOWNSHIP GOP CLUB 2808 TANSEL RD. INDIANAPOLIS, IN 46234	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	750.00		3 Oct 07 Marilyn Pfister
3. COMMITTEE TO ELECT LYNN MC WHIRTER 8638 CRESSMOR CT INDIANAPOLIS, IN 46234	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	250.00		19 May 07 Marilyn Pfister
4. COMMITTEE TO ELECT JEFF DINE 7224 ROLLING HILL DRIVE INDIANAPOLIS, IN 46214	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	250.00		3 July 07 Marilyn Pfister
5.	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)			

SUBTOTAL THIS PAGE OF SCHEDULE A \$ 1450.00



REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE B)  
ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

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RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code <u>A</u> HORIZON PRINTING 1618 SHELBY ST INDIANAPOLIS, IN 46203		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: FUND RAISING INVITATIONS	544.84		
Code <u>A</u> MARION CTY. REPUBLICAN CENTRAL COMMITTEE 120 E. VERMONT INDIANAPOLIS 46204		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: BALLOT MAILING	451.00		
Code <u>A</u> MARION CTY. REPUBLICAN CENTRAL COMMITTEE 120 E. VERMONT INDIANAPOLIS, IN 46204		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: PRINT & MAIL FLYERS	8500.00		
Code <u>A</u> BEYOND WORDS 6010 MT. AUBURN DR INDIANAPOLIS, IN 46224		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: DESIGN MAILERS	150.00		
Code <u>A</u> STAPLES 617 W. 11TH INDIANAPOLIS, IN 46202		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: PRINTING & FLYERS MATERIALS	341.83		
Code <u>A</u> US POSTAL SPEEDWAY BRANCH 46224		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: POSTAGE	295.61		
Code _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose:			
SUBTOTAL THIS PAGE OF SCHEDULE B			\$10283.28		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$10283.28		

# REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE D)  
DEBTS OWED BY THIS COMMITTEE

**INSTRUCTIONS:** Please type or print legibly in **BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, **OWED BY** the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

**FILE NUMBER**

49-2275

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CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSEER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
		NATURE OF DEBT			
CLYDE PFISTERER 1001 MT. ALBURADA INDIANAPOLIS, IN 46224 LENDER'S OCCUPATION: RETIRED		\$1500.00	1/24/07		\$1500 <sup>00</sup>
		CANDIDATE FILING FEE OF MICRCC			
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
SUBTOTAL THIS PAGE OF SCHEDULE D					\$1500 <sup>00</sup>
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet)					\$1500 <sup>00</sup>



# CANDIDATE'S STATEMENT OF ORGANIZATION AND DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE (CFA-1)

State Form 4604 (R3 / 11-99)

Indiana Election Commission (IC 3-9-1-3, 3-9-1-4, 3-9-1-5)

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK  
SEE INSTRUCTIONS ON REVERSE SIDE

FILE NUMBER

49-2275

IS THIS AN AMENDMENT? ☐ NO ☐ YES - IF YES, please enter the file number in this box

SECTION A CANDIDATE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.

1. NAME		2. TYPE OF COMMITTEE (Check only one)	
FIRST NAME	MIDDLE NAME	<input checked="" type="checkbox"/> Candidate's Principal Committee <input type="checkbox"/> Exploratory Committee	
3. STREET AND MAILING ADDRESS		4. E-MAIL (Optional)	
1001 Mt Auburn Dr		Cpfist1061@aol.com	
5. CITY	6. STATE	7. ZIP	8. COUNTY
Indpls	IN	46224	Marion
9. TELEPHONE (Day)		10. TELEPHONE (Evening)	
244-7156		244-7156	
11. PARTY AFFILIATION			
<input type="checkbox"/> Democratic <input type="checkbox"/> Libertarian <input checked="" type="checkbox"/> Republican <input type="checkbox"/> Other			
12. OFFICE SOUGHT (Include district number, if any. Not required for an exploratory committee.)			

SECTION B COMMITTEE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.

13. FULL NAME OF COMMITTEE (Do not abbreviate)		14. CHECK IF THIS IS A NEW NAME	
Friends of Pfisterer		<input type="checkbox"/>	
15. STREET AND MAILING ADDRESS		16. CHECK IF THIS IS A NEW ADDRESS	
1001 Mt Auburn Dr		<input type="checkbox"/>	
17. CITY	18. STATE	19. ZIP	20. COUNTY
Indpls	IN	46224	Marion
21. CHAIRPERSON'S FULL NAME		22. CHECK IF THIS IS A NEW CHAIRPERSON	
Clyde T Pfisterer		<input type="checkbox"/>	
23. STREET AND MAILING ADDRESS		24. CHECK IF THIS IS A NEW ADDRESS	
1001 Mt Auburn Dr		<input type="checkbox"/>	
25. CITY	26. STATE	27. ZIP	28. COUNTY
Indpls	IN	46224	Marion
29. BANK OR OTHER DEPOSITORIES (List all banks or other depositories in which the committee deposits funds, hold accounts, rents safety deposit boxes or maintains funds.)		30. AREA CODE TELEPHONE (Day)	
Greater Indpls First Lighters Credit Union		244-7156	
31. EXPLORATORY COMMITTEE (Give brief statement explaining purpose of an exploratory committee only)		32. SALARIES AND REIMBURSEMENTS (Will the committee pay the candidate a salary or reimbursement for lost wages?) IF YES, attach a copy of the contract. <input type="checkbox"/> NO <input type="checkbox"/> YES	

## SECTION C APPOINTMENT OF TREASURER (IC 3-9-1-14)

28. I, as Chairperson of the foregoing committee, appoint the following person as Treasurer of the Committee.

29. TREASURER'S FULL NAME		30. CHECK IF THIS IS A NEW TREASURER	
Clyde T Pfisterer		<input type="checkbox"/>	
31. STREET AND MAILING ADDRESS		32. CHECK IF THIS IS A NEW ADDRESS	
1001 Mt Auburn Dr		<input type="checkbox"/>	
33. CITY	34. STATE	35. ZIP	36. COUNTY
Indpls	IN	46224	Marion
37. AREA CODE TELEPHONE (Day)		38. TELEPHONE (Evening)	
244-7156		244-7156	

## SECTION D ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15)

35. I give notice that I accept the duties and responsibilities of Treasurer of this committee. I am not the chairperson of a committee (except as permitted for a candidate committee, under IC 3-9-1-7).

SIGNATURE OF PERSON ACCEPTING APPOINTMENT: Marilyn Pfisterer

## SECTION E CERTIFICATION OF STATEMENT

We certify as the candidate and the duly appointed Chairperson of the committee that we have examined this statement. To the best of our knowledge and belief it is true, correct and complete.	
36. TYPED OR PRINTED NAME OF CHAIRPERSON	SIGNATURE OF CHAIRPERSON
Marilyn Pfisterer	Marilyn Pfisterer
37. TYPED OR PRINTED NAME OF CANDIDATE	SIGNATURE OF CANDIDATE
Clyde T Pfisterer	Clyde T Pfisterer
WARNING: State law requires that any change in this information be reported within 10 days of the change (IC 3-9-1-10). A person who knowingly files a fraudulent report commits a Class D felony (IC 3-16-1-12). A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor (IC 3-16-1-14), and may be subject to civil penalties (IC 3-9-1-16, 3-9-1-17, 3-9-1-18).	

FOR OFFICE USE ONLY

MAR 3-03

MAR 3-03